#22064194 (3-10)

FORM B1 United States Bankruptcy Western District of New Y	Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Yard, Michelle	Name of Joint Debtor (Spouse	e) (Last, First, Middle):
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):  Michelle McCoy, Michelle McCray	All Other Names used by the (include married, maiden, and	Joint Debtor in the last 6 years d trade names):  0 4 2 0 8 9 0
Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all):  ***xx-xx-0647**	Last four digits of Soc. Sec. No. (if more than one, state all):	o. / Complete EIN or other Tax I.D. No.
Street Address of Debtor (No. & Street, City, State & Zip Code):  46 Salina Street  Rochester, NY 14611	Street Address of Joint Debtor	(No. & Street, City, State & Zip Code):
County of Residence or of the Principal Place of Business: Monroe	County of Residence or of the Principal Place of Business:	3
Mailing Address of Debtor (if different from street address):  Rochester, NY 14611	Mailing Address of Joint Deb	otor (if different from street address):
Venue (Check any applicable box)  ■ Debtor has been domiciled or has had a residence, principal pla preceding the date of this petition or for a longer part of such 1	80 days than in any other District.	in this District for 180 days immediately
☐ There is a bankruptcy case concerning debtor's affiliate, general		
Type of Debtor (Check all boxes that apply)  ☐ Individual(s) ☐ Railroad ☐ Corporation ☐ Stockbroker ☐ Partnership ☐ Commodity Broker ☐ Other ☐ Clearing Bank	the Petition  Chapter 7	of Bankruptcy Code Under Which is Filed (Check one box) Chapter 11 Chapter 13 Chapter 12 y to foreign proceeding
Nature of Debts (Check one box)  Consumer/Non-Business ☐ Business  Chapter 11 Small Business (Check all boxes that apply)  Debtor is a small business as defined in 11 U.S.C. § 101  Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)	■ Full Filing Fee attached □ Filing Fee to be paid in i Must attach signed appli	installments (Applicable to individuals only.) ication for the court's consideration is unable to pay fee except in installments.
Statistical/Administrative Information (Estimates only)  ☐ Debtor estimates that funds will be available for distribution to ☐ Debtor estimates that, after any exempt property is excluded an will be no funds available for distribution to unsecured creditors	d administrative expenses paid, the	- I 35 <b>~</b> 1
	-199 200-999 1000-over	CHESTED TO YOUR PARTY.
\$50,000 \$100,000 \$500,000 \$1 million \$10 million \$50	0,000,001 to \$50,000,001 to More than million \$100 million \$100 mil	ੂ 28
	0,000,001 to \$50,000,001 to More than 0 million \$100 million \$100 mil	<b>.</b>

Voluntary Petition	Name of Debtor(s):	FORM B1, Page 2
(This page must be completed and filed in every case)	Yard, Michelle	, <del>,</del> , <del>,</del>
(This page mass of compressed and great an extra page and great an		
Prior Bankruptcy Case Filed Within Last 6	Years (If more than one, attach addit	tional sheet)
Location	Case Number:	Date Filed:
Where Filed: None		
Pending Bankruptcy Case Filed by any Spouse, Partner, or		n one, attach additional sheet)
Name of Debtor:	Case Number:	Date Filed:
None		
District:	Relationship:	Judge:
G:		<u></u>
	atures	
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this		chibit A red to file periodic reports (e.g., forms
petition is true and correct.	10K and 10Q) with the Securities at	nd Exchange Commission pursuant to
If petitioner is an individual whose debts are primarily consumer debts	Section 13 or 15(d) of the Securities	
and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand	requesting relief under chapter 11)  Exhibit A is attached and mad	de a part of this patition
the relief available under each such chapter, and choose to proceed under		thibit B
chapter 7.  I request relief in accordance with the chapter of title 11, United States	(To be completed if	f debtor is an individual
Code, specified in this petition.	whose debts are pri	imarily consumer debts)
x Muhelle unal	I, the attorney for the petitioner name that I have informed the petitioner the	led in the foregoing petition, declare
Signature of Debtor Mithelle Yard	chapter 7, 11, 12, or 13 of title 11, U	United States Code, and have
·	explained the relief available under	each such chapter.
X Signature of Laint Debtar	X Signature of Attornov for Delta	
Signature of Joint Debtor	Signature of Attorney for Debto Fred Lester	or(s) Date
Telephone Number (If not represented by attorney)	Exi	hibit C
receptione reutilibet (if not represented by attorney)	Does the debtor own or have posses	ssion of any property that poses
70.	a threat of imminent and identifiable safety?	harm to public nealth or
Date	Yes, and Exhibit C is attached	d and made a part of this petition.
Signature of Attorney	■ No	-
X Signature of Attorney for Debtor(s)	Signature of Non-At	torney Petition Preparer
Fred Lester	I certify that I am a bankruptcy petiti	tion preparer as defined in 11 U.S.C.
Printed Name of Attorney for Debtor(s)	§ 110, that I prepared this document provided the debtor with a copy of the	t for compensation, and that I have
Fred Lester	provided the debtor with a copy of the	his document.
Firm Name	Printed Name of Bankruptcy Pe	etition Prenarer
102 S. Main St		i i
Pittsford, NY 14534	Social Security Number (Requir	red by 11 U.S.C.§ 149(c).)
Address		S (2)
_585-385-0465_Fax: 585-381-7285		ēg 🚉 其
Telephone Number	Address	
D	Mames and Social Security nun	nbers of all other individuals who
Date	prepared or assisted in preparing	g this document:
Signature of Debtor (Corporation/Partnership)  I declare under penalty of perjury that the information provided in this		
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this		되 <u>일</u> ;;
petition on behalf of the debtor.	Tf Alan and norson prepare	<b>≐</b> ∞
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.		ed this document, attach additional priate official form for each person.
V	X	r
X	Signature of Bankruptcy Petition	n Preparer
orginature of Francisco individual	~- <u>-</u>	ii i i i i i i i i i i i i i i i i i i
Printed Name of Authorized Individual	Date	
	1 1 1	0.4
Title of Authorized Individual	A bankruptcy petition preparer's provisions of title 11 and the Fe	3 failure to comply with the
	Procedure may result in fines or	r imprisonment or both. 11
Date	U.S.C. § 110; 18 U.S.C. § 156.	•

In re	Michelle Yard		Case No.		
_		Debtor			
			Chapter	7	

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

			AM	OUNTS SCHEDULED	
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
Λ - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	2,050.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		1,900.00	
E - Creditors Holding Unsecured Priority Claims	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		32,847.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1	92.0		
I - Current Income of Individual Debtor(s)	Yes	1	***		552.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,246.00
Total Number of Sheets of ALL S	chedules	18			
	To	otal Assets	2,050.00		
		i.	Total Liabilities	34,747.00	

In re	Michelle Yard	Case No.	

Debtor

### SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. (See Schedule D.) If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Location: 46 Salina Street, Rochester NY . Client a month to month tenant	none	W	0.00	0.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 0.00 (Total of this page)

Total > 0.00

In re	Michelle Yard	Case No.
-	Γ	ebtor

# SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property'

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash for emergencies at debtor's residence Location: 46 Salina Street, Rochester, New York 14611	-	50.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Location: 46 Salina Street, Rochester NY- Debtor does not have a checking account, or other financial accounts	w	0.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household furnishings Location: 46 Salina Street, Rochester NY	-	800.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	none: Location: 46 Salina Street, Rochester NY	-	0.00
б.	Wearing apparel.	Clothing owned by debtors at debtors' residence and in debtors' possession. Nothing valued over \$30.  Location: 46 Salina Street, Rochester NY	-	300.00
7.	Furs and jewelry.	Diamond engagement ring owned by Ms Yard, in her possession. Location: 46 Salina Street, Rochester NY	-	200.00
		Wedding bands in debtors' possession. Location: 46 Salina Street, Rochester NY	-	200.00

Sub-Total > 1,550.00
(Total of this page)

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Case No.
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Debtor

# **SCHEDULE B. PERSONAL PROPERTY**

			(Continuation Sneet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
8.	Firearms and sports, photographic, and other hobby equipment.	none Locati	ion: 46 Salina Street, Rochester NY	-	0.00
9.	Interests in insurance policies.  Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
12.	Stock and interests in incorporated and unincorporated businesses.  Itemize.	x			
13.	Interests in partnerships or joint ventures. Itemize.	X			
14.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
15.	Accounts receivable.	X			
16.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	x			
17.	Other liquidated debts owing debtor including tax refunds. Give particulars.	x			
18.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
				Sub-Tota	ul > 0.00
			(Te	otal of this page)	<b>0.00</b>
Shee	t 1 of 3 continuation sheets a	ittached			

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М	ic	hel	le	Ya	rd

Case No.		
Cuse 110.		

Debtor

# SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

			(Communion Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
19.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	х			
20.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
21.	Patents, copyrights, and other intellectual property. Give particulars.	X			
22.	Licenses, franchises, and other general intangibles. Give particulars.	X			
23.	Automobiles, trucks, trailers, and other vehicles and accessories.	and 97	Chrysler Concord with dent in front fender 7,000 miles on: 46 Salina Street, Rochester NY	-	500.00
24.	Boats, motors, and accessories.	none Locati	on: 46 Salina Street, Rochester NY	-	0.00
25.	Aircraft and accessories.	X			
26.	Office equipment, furnishings, and supplies.	X			
27.	Machinery, fixtures, equipment, and supplies used in business.	x			
28.	Inventory.	X			
29.	Animals.	X			
30.	Crops - growing or harvested. Give particulars.	X			
31.	Farming equipment and implements.	X			
				1	
			(Tota	Sub-Tota l of this page)	1> 500.00

Sheet 2 of 3 continuation sheets attached

In re	Michelle Yard			Case No.	
			Debtor		
		SCHED	ULE B. PERSONAL PROPER' (Continuation Sheet)	ГҮ	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
32. Fai	rm supplies, chemicals, and feed.	х			
	ner personal property of any kind talready listed.	x			

Sheet 3 of 3 continuation sheets attached

Sub-Total >
(Total of this page)
Total >

0.00

2,050.00

-		
ln re	Michelle	Yard

Debtor

# SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: [Check one box]

☐ 11 U.S.C. §522(b)(1): ☐ 11 U.S.C. §522(b)(2): Exemptions provided in 11 U.S.C. §522(d). Note: These exemptions are available only in certain states. Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemption
Cash on Hand Cash for emergencies at debtor's residence Location: 46 Salina Street, Rochester, New York 14611	Debtor & Creditor Law § 283(2)	50.00	50.00
Checking, Savings, or Other Financial Accounts, C Location: 46 Salina Street, Rochester NY- Debtor does not have a checking account, or other financial accounts	Certificates of Deposit NYCPLR § 5205(d)(2)	0.00	0.00
Household Goods and Furnishings Household furnishings Location: 46 Salina Street, Rochester NY	NYCPLR § 5205(a)	100%	800.00
Books, Pictures and Other Art Objects; Collectible none: Location: 46 Salina Street, Rochester NY	<u>s</u> NYCPLR § 5205(a)(2)	0.00	0.00
Wearing Apparel Clothing owned by debtors at debtors' residence and in debtors' possession. Nothing valued over \$30. Location: 46 Salina Street, Rochester NY	NYCPLR § 5205(a)(5)	800.00	300.00
Furs and Jewelry Diamond engagement ring owned by Ms Yard, in her possession. Location: 46 Salina Street, Rochester NY	NYCPLR § 5205(a)(6)	1,500.00	200.00
Wedding bands in debtors' possession. Location: 46 Salina Street, Rochester NY	NYCPLR § 5205(a)(6)	200.00	200.00
Firearms and Sports, Photographic and Other Hob none Location: 46 Salina Street, Rochester NY	by Equipment NYCPLR § 5205(a)	0.00	0.00
Automobiles, Trucks, Trailers, and Other Vehicles 1996 Chrysler Concord with dent in front fender and 97,000 miles Location: 46 Salina Street, Rochester NY	Debtor & Creditor Law § 282(1)	2,400.00	500.00
Boats, Motors and Accessories none Location: 46 Salina Street, Rochester NY	NYCPLR § 5205(a)	0.00	0.00

In re	Michelle Yard	Case No
_	Debi	tor

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

		_						
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xxxx7264	CODEBTOR	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Webster Chrysler Jeep	COZH_ZGWZH	DZL_QD_D&F	Ιō		AMOUNT OF CLAIM
Trocount No. ARRY 204	ł		Webster Chrysler Jeep		E			
Certegy Payment Recovery Services 11601 Roosevelt Blvd Saint Petersburg, FL 33716		-						826.00
Account No.	┢	$\vdash$		$\vdash$		╁	+	
Conserve 700 Perinton Hills Fairport, NY 14450		-						
								185.00
Account No. xxx9491  Credit Bureau of Rochester 19 Prince St Rochester, NY 14607		-	Medical needs-Rochester General Hospital					
Account No. xxx9703	_	<u> </u>		Ш		L	$\perp$	333.00
Credit Bureau of Rochester 19 Prince St Rochester, NY 14607		-	medical needs-Rochester General Hospital					1,953.00
5 continuation sheets attached			S	ubto	l otal	 I	+	
continuation sneets attached			(Total of th					3,297.00

In re	Michelle Yard	Case No.	
		Debtor	

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	6	Hu	sband, Wife, Joint, or Community	S	Ų N	D	
AND MAILING ADDRESS	DEB	Н	DATE CLAIM WAS INCURRED AND	Ν̈́	ĮĽ.	s	
INCLUDING ZIP CODE,	В	W	CONSIDERATION FOR CLAIM. IF CLAIM	T	a	۱,	
AND ACCOUNT NUMBER (See instructions.)	Į.	C	IS SUBJECT TO SETOFF, SO STATE.	N	Ų	Ţ	AMOUNT OF CLAIM
	R	Ľ		ZGWZ	D	OB-MD	
Account No. xxx7470				<b>1</b>	A T E		
Condit Days and D. J.				<u> </u>	D	Ш	
Credit Bureau of Rochester	ŀ			1			
19 Prince St.	ŀ	-			l		
Rochester, NY 14607							
							330.00
Account No. xxx8418			medical- Rural Metro	$\vdash$		Н	
0 111 0							
Credit Bureau of Rochester					ı		
19 Prince St		-			ĺ		
Rochester, NY 14607							
							380.00
Account No. xxx8418			Medical needs-Strong Memorial Hospital	$\vdash$	$\vdash$	H	
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Credit Bureau of Rochester					ı I		
19 Prince St		-					
Rochester, NY 14607		li					
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							87.00
Account No. xxx8053			Food-Wegmans		$\exists$	Ħ	
On the D							
Credit Bureau of Rochester							
19 Prince St		-					
Rochester, NY 14607							
		ı			ļ	ı	
					Ì		180.00
Account No. xxx5516			Medical - Rochester General Hospital	П	7		
Condit Property of Parks 1		ı					
Credit Bureau of Rochester						- 1	
19 Prince St		-					
Rochester, NY 14607							
		ł					
							50.00
Sheet no. 1 of 5 sheets attached to Schedule of			S	ubto	 otal	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of the			- 1	1,027.00

In re	Michelle Yard	Case No.	
_		Debtor	

#### SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community,"

the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

The same of the design has no creditor		_	ng secured claims to report on this Schedule D.	T		-		
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)			sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND MARKET VALUE  OF PROPERTY  SUBJECT TO LIEN	COZH_ZGUZH	OM-YOURD-FZC		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION IF ANY
Account No.				Ŧ	TEC			
Lobel Finance P.O. Box 3000 Anaheim, CA 92803		-			ַ			
	_		Value \$ 500.00				1,900.00	1,400.00
Account No.			Value \$					
			Value \$					
Account No.			Value \$					
0		Ш		ubto	tal	+		
o continuation sheets attached		(Total of this page)					1,900.00	
			(Depart on Summary of Sal	To		- 1	1,900.00	

In re	Michelle Yard		Case No.
		Debtor	

# SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

"Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules. Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,650\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, which ever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(3). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$4,650\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5). ☐ Deposits by individuals Claims of individuals up to \$2,100\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6). ☐ Alimony, Maintenance, or Support Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7). ☐ Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8). ☐ Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors

\*Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

In re	Michelle Yard	Case No.	
_			
	Debtor		

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	8	Hu	isband, Wife, Joint, or Community	S	U	D	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	H & J C	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH_ZGWZH	DZ1-GD-D4FED	SPUTED	AMOUNT OF CLAIM
Account No. xxx5988			Rural Metro		E		
Credit Bureau of Rochester 19 Prince St Rochester, NY 14607		_			D		331.00
Account No. xxx7470	┢	$\vdash$	Furniture-Sun Mark	┝	$\vdash$	┢	
Credit Bureau of Rochester 19 Prince St Rochester, NY 14607		-	T drintare-out mark				383.00
Account No. xxx2180	┞	<u> </u>		<u> </u>	<u> </u>		363.00
Account No. XXX2180							
Credit Bureau of Rochester 19 Prince St Rochester, NY 14607		-					
Account No.							488.00
Credit Bureau of Rochester 19 Prince St Rochester, NY 14607		_					332.00
Account No.				$\vdash$	H		332.00
Excellus Health P.O. Box 4753 Syracuse, NY 13221		_					90.00
Sheet no. 2 of 5 sheets attached to Schedule of		ш	S	ubt	ota	 1	
Creditors Holding Unsecured Nonpriority Claims			(Total of th	nis p	oag	e)	1,624.00

T	
ln	TP

М	ich	ell	ه ۱	/a	rd
171		CII	~	ıa	ıu

Debtor

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CODEBTOR Husband, Wife, Joint, or Community 002--ZGWZ-CREDITOR'S NAME AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, W CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С (See instructions.) Account No. xxxx6237 **Ballys Exercise Financial Credit** P.O. Box 50700 Phoenix, AZ 85076 2,152.00 Account No. x6245 Mercantile Adjustment Bureau 40 West Av Rochester, NY 14611 97.00 Account No. Mercantile Adjustment Bureau 40 West Av Rochester, NY 14611 314.00 Account No. xxx3393 Mercantile Adjustment Bureau 40 West Av Rochester, NY 14611 7,990.00 Account No. Mercantile Adjustment Bureau 40 West Av Rochester, NY 14611 1,085.00 Sheet no. 3 of 5 \_ sheets attached to Schedule of Subtotal 11,638.00 Creditors Holding Unsecured Nonpriority Claims (Total of this page)

In re	Michelle Yard	Case No.
<del></del>	D	ebtor

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

***************************************							
CREDITOR'S NAME,	16	Hu	sband, Wife, Joint, or Community	- 4200	DZJ	P	
AND MAILING ADDRESS	Ιğ	н	DATE OF A BANK G BIOLEDAY AND	N	Ĺ	SPUTE	İ
INCLUDING ZIP CODE,	B	w	DATE CLAIM WAS INCURRED AND	Ţ	1	l P	
AND ACCOUNT NUMBER	Ī	J	CONSIDERATION FOR CLAIM. IF CLAIM	Ìй	Ü	Ť	AMOUNT OF CLAIM
(See instructions.)	CODEBTOR	С	IS SUBJECT TO SETOFF, SO STATE.	ZGEZ	טו	E	
Account No.	$\dagger$			N	ATED		
	1			L	D		
Monroe County Dept. of Social							
Services	l	-					
P.O. Box 23440	l						
Rochester, NY 14692							
1,700,000,000,000		l					
	L						5,398.00
Account No. xxxxx-x-1301			student loan				
Nelnet Trust							
P.O. Box 17460		-				l	
Denver, CO 80217		l		1			
	l						
							4,000.00
Account No. xxxx9277	1			$\vdash$			
	ł						
Parkridge Hospital	l						
				Ш			
P.O. Box 26201		-					
New York, NY 10087							
	ı						
							500.00
Account No. xxxx7058				$\vdash$			
	i						
Parkridge Hospital							
P.O. Box 26201		_					
New York, NY 10087							
101K, 141 10007	l						
					i		
							500.00
Account No.							
	1				i		
Pediatric Associates							
1425 Portland Av.		-					
Rochester, NY 14621			•				
							118.00
Sheet no. 4 of 5 sheets attached to Schedule of			S	ubto	ntal	$\dashv$	
Creditors Holding Unsecured Nonpriority Claims						- 1	10,516.00
Transit Training Officered Prohipmonty Claims			(Total of the	us p	ag	ا (ت	

In re	Michelle Yard	Case No.
_		Debtor

# SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	Ta	_		_	_		
CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community	CO	U N	P	
AND MAILING ADDRESS	CODEBLOR	Н	DATE CLAIM WAS INCUIDED AND	Ŋ	- CD	S	
INCLUDING ZIP CODE,	В	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	T	ď	15	
AND ACCOUNT NUMBER (See instructions.)		C	IS SUBJECT TO SETOFF, SO STATE.	N	ľ	E	AMOUNT OF CLAIM
· · · · · · · · · · · · · · · · · · ·	R	ľ		ZGHZH	D	Ď	
Account No.		1		171	A T E		
9742	1				<u>5</u>		
Rochester Gas and Electric	ı						
89 East Av	l	-					
Rochester, NY 14649	l						
							3,900.00
	↓_			Ш	L	<u> </u>	3,300.00
Account No.							
	l						1
Time Warner							
One Mt. Hope Av		-					1
Rochester, NY						ĺ	
						l	
	l	1				l	276.00
Account No. xxxx2042	┢	├	Pochostor Constal Hoonitel	$\vdash$	$\vdash$	⊢	
Trocount Ito. AAAAEOTE	Į		Rochester General Hospital			l	
Via Health						l	
P.O. Box 10758		1				ł	
Rochester, NY 14620		-					
Nochester, NY 14020	l					l	
						l	
	l				l l	1	165.00
Account No. xxxx2234			Rochester General Hospital	П	$\Box$	Г	
	١.		•		ιl		
Via Health							
P.O. Box 10758		-					
Rochester, NY 14620							
	Ì				ιI	!	
							333.00
A account NT- vivini 00 40	<u> </u>	Ш		Ш	Ш		333.00
Account No. xxxx9842					ļ		
Via II a lab					,		
Via Health					.		
P.O. Box 10758		-					
Rochester, NY 14620							
					. I		
							71.00
Sheet no. <b>5</b> of <b>5</b> sheets attached to Schedule of	ш			<u> </u>		$\dashv$	
				ubto		- 1	4,745.00
Creditors Holding Unsecured Nonpriority Claims			(Total of the	iis p	age	e)	4,7 40.00
				To	otal	ı [	
			(Report on Summary of Sci			- 1	32,847.00
			, ,			' /	L

In re	Michelle Yard	Case No.	
	Debtor	<del></del>	

# SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.

State whether lease is for nonresidential real property.

State contract number of any government contract.

1116	Michelle Fard	Case No.				
		Debtor				
	SCH	EDULE H. CODEBTORS				
debtor report immed	ovide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years liately preceding the commencement of this case.					
	NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR				

In re	Michelle Yard		Case No.	
_		Debtor		

# SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

	integration is fried, unless the spouses are separated and a joint petition is not fried.						
Debtor's Marital Status:			BTOR AND SPOUSE				
Separated	RELATIONSHIP son son son son		AGE 11 13 8 9				
EMPLOYMENT:	DEBTOR	<u>_</u>		SPOUSI	₹		
Occupation No	ırsing Assistant	Nursir	ng As	ssistance			
Name of Employer Ki	rkhaven Nursing	Jennif	er Ma	atthews Nursing	Home		
	months	2 mon	ths				
	5 Alexander St			and Av			
Ro	ochester, NY 14607	Roche	ester,	NY 14621			
INCOME: (Estimate of	average monthly income)			DEBTOR		SPOUSE	
	iges, salary, and commissions (pro rate if not paid mon	ithly)	\$	700.00	\$	N/A	
	me	• •	\$ 	0.00	\$	N/A	
· ·		_	\$	700.00	\$	N/A	
LESS PAYROLL DE		L	Ψ		Ψ	1327 1	
	ocial security		\$	148.00	\$	N/A	
			\$	0.00	\$	N/A	
c. Union dues			\$	0.00	\$	N/A	
			\$	0.00	\$	N/A	
-			\$	0.00	\$	N/A	
	ROLL DEDUCTIONS		\$	148.00	\$	N/A	
TOTAL NET MONTHLY	TAKE HOME PAY		\$	552.00	\$	N/A	
	ration of business or profession or farm (attach detailed						
			\$	0.00	\$	N/A	
	<sup>7</sup>		\$	0.00	\$	N/A	
			\$	0.00	\$	N/A	
or that of dependents liste	support payments payable to the debtor for the debtor'd above	s use	\$	0.00	\$	N/A	
Social security or other go	overnment assistance				_		
(Specify)			\$	0.00	\$	N/A	
Dansian or ratinament in	ome		\$	0.00	\$	N/A	
Other monthly income	эне		\$	0.00	\$	N/A	
(Specify)			\$	0.00	\$	N/A	
\-rJ/			\$	0.00	\$	N/A	
TOTAL MONTHLY INC	OME	Γ	\$	552.00	\$	N/A	
TOTAL COMBINED MO	ONTHLY INCOME \$552.00	<u>L.</u>	(R	eport also on Sun	nmary o	of Schedules)	

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

Michelle Yard	Case No.

In re

### Debtor

# SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Rent or home mortgage payment (in				-		<i>.</i>	· · · · · \$	600.00
Are real estate taxes included?				X				
s property insurance included?		X						
Jtilities: Electricity and heating fue								
Water and sewer							\$	0.00
Telephone							· · · · · \$	200.00
Other Back rent-\$20								
Home maintenance (repairs and upke	еер)						\$	0.00
Food							\$	200.00
Clothing							\$	100.00
aundry and dry cleaning								
Medical and dental expenses								
Transportation (not including car pay								
Recreation, clubs and entertainment,								
Charitable contributions								
nsurance (not deducted from wages								
Homeowner's or renter's.					· · · · · · · · · · · · · · ·		\$	0.00
Life								65.00
Health								0.00
Auto								88.00
						<del></del> · · · ·	· · · · · • • • • • • • • • • • • • • •	0.00
Caxes (not deducted from wages or in (Specify)					ts)		\$	0.00
nstallment payments: (In chapter 12								0.00
Auto								377.00
Other cable								80.00
Otherstudent loan							\$	43.00
Other school tuition			=,				\$	157.00
Alimony, maintenance, and support								
Payments for support of additional d								
Regular expenses from operation of								
Other	10.1					<u> </u>	\$	0.00
Other		,				<u> </u>	<u>\$</u>	0.00
OTAL MONTHLY EXPENSES OF	enort also	on Sum	mora of	Sahadul	oa)		\$	2,246.00
TOTAL MONTHLY EXPENSES (R	eport also	on Sum	mary of	Schedul	es)		· · · · · [2	2,245.00
OR CHAPTER 12 AND 13 DEBTO	RSONLY	7]						
rovide the information requested bel			ther plan	paymen	its are to be made	e bi-week	ly, monthly.	annually, or at
her regular interval.	,	0	1	1 3			J , J ,	
A. Total projected monthly income						\$	N/A	
						· · · · · · · · · · · · · · · · · · ·	N/A	<del></del>
<ol><li>Total projected monthly expenses</li></ol>						<b>n</b>	IW/A	
B. Total projected monthly expenses Excess income (A minus B)							N/A	<del></del>

In re	Michelle Yard		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor, general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** 

SOURCE (if more than one)

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

#### 3. Payments to creditors

None

None

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL OWING

b. List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATE OF PAYMENT

AMOUNT STILL AMOUNT PAID

**OWING** 

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

COURT OR AGENCY

NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

DESCRIPTION AND VALUE OF

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN

OF COURT

DATE OF

DESCRIPTION AND VALUE OF

CASE TITLE & NUMBER ORDER **PROPERTY** 

#### 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

#### 10. Other transfers

None

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

**PROPERTY** 

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT

NOTICE

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

SITE NAME AND ADDRESS

**GOVERNMENTAL UNIT** 

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

**TAXPAYER** 

I.D. NO. (EIN) ADDRESS

NATURE OF BUSINESS

**BEGINNING AND ENDING** 

DATES

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

**NAME** 

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None

b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME None

ADDRESS

was issued

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of this case by the debtor.

NAME AND ADDRESS

DATE ISSUED

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None h List th

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

**NAME** 

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT.

RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

**ADDRESS** 

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITI F

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date \_\_\_\_\_

Signature A

Michelle Yard

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

In re	Michelle Yard		Case No.	
		Debtor(s)	Chapter	7
	DECLARATI	ON CONCERNING DEBTOR	S SCHEDUL	ES
	DECLARATION UN	DER PENALTY OF PERJURY BY I	INDIVIDUAL D	EBTOR
	I declare under penalty of p  20 sheets [total shown on summ knowledge, information, and belief.	erjury that I have read the foregoing surnary page plus 1], and that they are true	nmary and sched and correct to the	ules, consisting of ne best of my
Date <sub>-</sub>		Signature/ <u>Uchille</u>	yard	
		Michelle Yard	<b>\</b>	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

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Best Case Bankruptcy

In re Michelle Yard				Cas	e No.		
		I	Debtor(s)	Cha	pter	7	
	CHAPTER 7 INDIVIDUA	AL DEBTO	R'S STAT	EMENT OF	INT	ENTION	
1. I1	nave filed a schedule of assets and liabilities w	hich includes	consumer det	ots secured by pr	operty	of the estate	
2. I i	ntend to do the following with respect to the p	property of the	estate which	secures those co	nsume	r debts:	
	a. Property to Be Surrendered.						
	<b>Description of Property</b> -NONE-		Credito	r's name			
	b. Property to Be Retained			[Check	any a	pplicable sta	atement.]
1.	Description of Property	Creditor's Na: <b>Lobel Finar</b>		Property is claimed as exempt <b>Debtor will rea</b>	rede purs U.S.	perty will be beemed suant to 11 C. § 722 for fair mark	U.S.C. § 524(c)
Date			Michelle Yard Debtor	le yar	d_		

		•	vestern District of New Y	огк	
In re	Michelle Yard			Case No.	<del></del>
			Debtor(s)	Chapter	7
	DISC	CLOSURE OF COM	PENSATION OF ATTO	ORNEY FOR DI	EBTOR(S)
	compensation paid to:	me within one year before the	y Rule 2016(b), I certify that e filing of the petition in bankrupation of or in connection with the	otcy, or agreed to be pa	the above-named debtor and that id to me, for services rendered or to follows:
	For legal services	s, I have agreed to accept		<b>\$</b>	0.00
	Prior to the filing	g of this statement I have rece	ived	<b>\$</b>	0.00
	Balance Due			<b> \$</b>	0.00
2.	The source of the com	pensation paid to me was:			
	Debtor	☐ Other (specify):			
3.	The source of compen	sation to be paid to me is:			
	Debtor	Other (specify):			
4.	■ I have not agreed firm.	to share the above-disclosed	d compensation with any other p	person unless they are	members and associates of my law
			npensation with a person or person e names of the people sharing ir		ers or associates of my law firm. A tached.
	<ul> <li>a. Analysis of the det</li> <li>b. Preparation and fil</li> <li>c. Representation of t</li> <li>d. [Other provisions a Negotiation reaffirmation</li> </ul>	btor's financial situation, and ling of any petition, schedules the debtor at the meeting of c as needed] ns with secured creditor	lications as needed; prepai	determining whether to thich may be required; g, and any adjourned he e; exemption plann	o file a petition in bankruptcy;
6.	Representa	e debtor(s), the above-disclos ation of the debtors in a er adversary proceeding.	ed fee does not include the following dischargeability actions,	wing service: judicial lien avoida	nces, relief from stay actions
			CERTIFICATION		
this b	pankruptcy proceeding	soing is a complete statement q 0 4	of any agreement or arrangemen	nt for payment to me for	r representation of the debtor(s) in
	<u>J</u>		Fred Lester	V.Z.	
			Fred Lester 102 S. Main St		
			Pittsford, NY 1	4534	
L			585-385-0465	Fax: 585-381-7285	

In re	Michelle Yard		Case No.	
		Debtor(s)	Chapter	7
	VERIF	ICATION OF CREDITOR M	<b>ATRIX</b>	
The abo	ove-named Debtor hereby verifies that	t the attached list of creditors is true and co	orrect to the bes	st of his/her knowledge.
Date:		Michelle Yard	d	

Signature of Debtor

Certegy Payment Recovery Services 11601 Roosevelt Blvd Saint Petersburg, FL 33716

Conserve 700 Perinton Hills Fairport, NY 14450

Credit Bureau of Rochester 19 Prince St Rochester, NY 14607

Credit Bureau of Rochester 19 Prince St. Rochester, NY 14607

Excellus Health P.O. Box 4753 Syracuse, NY 13221

Financial Credit P.O. Box 50700 Phoenix, AZ 85076

Lobel Finance P.O. Box 3000 Anaheim, CA 92803

Mercantile Adjustment Bureau 40 West Av Rochester, NY 14611

Monroe County Dept. of Social Services P.O. Box 23440 Rochester, NY 14692

Nelnet Trust P.O. Box 17460 Denver, CO 80217

Parkridge Hospital P.O. Box 26201 New York, NY 10087 Pediatric Associates 1425 Portland Av. Rochester, NY 14621

Rochester Gas and Electric 89 East Av Rochester, NY 14649

Time Warner One Mt. Hope Av Rochester, NY

Via Health P.O. Box 10758 Rochester, NY 14620